

# EMERGENCY EQUIPMENT – USE INVOICE

OPTIONAL FORM 286

PAGE \_\_\_\_\_ OF \_\_\_\_\_

1. CONTRACTOR a. name and address					2. INCIDENT OR PROJECT NAME								
					3. AGREEMENT NUMBER (form OF-294)								
					4. EFFECTIVE DATES OF AGREEMENT a. beginning _____ b. ending _____								
5. EQUIPMENT (list make, model, serial number, etc)					6. POINT OF HIRE (location when hired)								
					7. DATE OF HIRE			8. TIME OF HIRE					
9. ADMINISTRATIVE OFFICE FOR PAYMENT					10. THE WORK RATE IS BASED ON ALL OPERATING SUPPLIES BEING FURNISHED BY  CONTRACTOR (wet) _____ GOVERNMENT (dry) _____								
					11. OPERATOR FURNISHED BY  CONTRACTOR _____ GOVERNMENT _____								
					12. RESOURCE ORDER NUMBER								
13. YEAR 19__ MO ____ DA ____		14. WORK OR DAILY RATE			15. SPECIAL RATE			16. TOTAL AMOUNT EARNED ( 14c+ 15c)		17. GUARANTEE		18. AMOUNT (Column 16 or 17 whichever is greater)	
a. UNITS WORKED (MI/HR/DA)		b. RATE	C. AMOUNT	a. UNITS WORKED (MI/HR/DA)		b. RATE	c. AMOUNT						
19. CHARGE CODE					20. OBJECT CODE			23. GROSS AMOUNT DUE					
								24. ITEM 23 FROM PREVIOUS PAGE					
21. EQUIPMENT WAS RELEASED WITHDRAWN DATE: TIME:								25. TOTAL AMOUNT DUE					
								26. DEDUCTIONS (attach statement)					
22. REMARKS								27. ADDITIONS (attach statement)					
								28. NET AMOUNT DUE					
<p><i>NOTE: CONTRACT RELEASE FOR AND IN CONSIDERATION FO RECEIPT OF PAYMENT IN THE AMOUNT SHOWN ON "NET AMOUND DUE" LINE 28. CONTRACTOR HEREBY RELEASES THE GOVERNMENT FROM ANY AND ALL CLAIMS ARISING UNDER THIS AGREEMENT EXCEPT AS RESERVED IN "REMARKS" BLOCK 22.</i></p>													
30. CONTRACTOR'S SIGNATURE					31. DATE		32. RECEIVING OFFICER'S SIGNATURE			33. DATE			
34. PRINT NAME AND TITLE					35. PRINT NAME AND TITLE								